

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J		
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	A.S	943	8-3-1
RESPONSE FORMALITY REVIEW	LI	1106	1/2/02

# INDEX OF CLAIMS

**BEST AVAILABLE COPY**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	2/10/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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 28/03/01  
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